

UNITED STATES DISTRICT COURT, EASTERN
DIVISION, WILL COUNTY, ILL.

DENNIS Taylor, #R68729

1:17-cv-0442

Judge Thomas M. Durkin

Magistrate Judge Sheila M. Finnegan

PC5

No. RECEIVED

JAN 19 2017

THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

I.A.O.C.,
Randy Pfister, Warden - Stateville
Jeffrey Hudchison, Warden - Menard
Michael Atchison, Assist. Deputy Dir., et al.,
Defendants

I. SUPPLEMENTAL COMPLAINT - CLASS ACTION
PREFERRED

1. This is a civil action authorized by 42 U.S.C. Section 1983 to redress the deprivation, under color of state law, of right secured by the Constitution of the United States. The Court has jurisdiction under 28 U.S.C. Section 1313 and 1314 (a)(3). Plaintiff seeks declaratory relief pursuant to 28 U.S.C. Section 2201 and 2202. Plaintiff claims for injunction relief are authorized by 28 U.S.C. Section 2283 and 2284 Rule 65, and Rule 23 (class action) Title 28 of the Federal Rule of Civil Procedure.

2. The Will County District Court of Illinois is an appropriate venue under 28 U.S.C. Section 139 (b)(2), because it is where the events given rise to this claim occurred.

II PLAINTIFF(S)

3. Plaintiff, DENNIS Taylor was at time

mentioned herein a prisoner of the State of Illinois in the custody of the Illinois Department of Corrections. He is currently confined to Menard Correctional Center in Menard Illinois.

III DEFENDANT(S)

4. Defendant Randy Pfister is Warden of Stateville C.C. He is legally responsible for the overall operation of the institution, and for the welfare of all the inmates in Stateville CC, Joliet, Illinois.

5. Defendant Michael Alchison is Assistant Deputy Director of Operations for Illinois Department of Corrections. Upon information and belief, he was the Warden of Menard CC, and originally implemented the Weapon Violator / Staff Assaulters program in question, and therefore, is legally responsible for the treatment of all inmates on said policy that is not rationally related to a legitimate governmental purpose.

6. Defendant Jeffery Hudchison is Warden of Menard C.C. He is legally responsible for the overall operation of the Welfare of all the inmates in Menard C.C., in Menard Illinois.

III FACTS

7. ON Feb. 5, 2016, plaintiff was released from Stoleville's Segregation, and taken to the Clothing room to pick up his Institutional Clothings. He was told by the Clothing room Sgt. that he is a Weapon Violator/Staff Assaulter, and must wear Strips (black + white). This was the first time plaintiff was told that he was in the above status. He has never been given anything in writing informing him of this policy nor given an opportunity to: Call witnesses, have a hearing or present evidence to challenge the alleged unconstitutional due process Violation in question.

8. ON Feb. 6, 2016, plaintiff asked Cell house, Major Tom and Lt.

Johnson for rules on said policy, and was told that Stateville C.C. did not have any. The above officials told plaintiff that he had to write Freedom of Information Act (F.O.I.A) to possibly obtain said policy.

9. On there of, May, 2016, after exhausting his institutional remedies concerning above matter, plaintiff wrote FOIA, and was told that the information was not available (see Exhibit O).

10. On June 1, 2016, plaintiff appealed F.O.I.A. decision to the Public Access Counselor, Lisa Madigan's Office (see Exhibit P).

11. On June 30, 2016, above Office ordered I.D.O.C, Joel Dieters to forward a UN-redacted and Confidential Copies for her review, within seven (7) business days, (see Exhibit P).

12. ON July 13, 2016, Lisa Madigan's Office gave plaintiff an option to reply to the public body's response (see Exhibit Q).
13. ON July 20, 2016, plaintiff forward his reply to above Office's review of IDOC-FOIA response, and requested that its Office continue the investigation of said matter, (no copy of letter is available).
14. ON October 8, 2016, Lisa Madigan's Office notified plaintiff that it had received his reply, and a review is currently under consideration, and "Once we issue a determination, we will send a copy to you as well as to IDOC," (see Exhibit R).
15. ON Dec. 14, 2016, Menard Administration informed plaintiff, and all Weapon Violator/ Staff Assaulters that our visit room time has been cut from 4 hours to 2 hours,

and it will be held behind the glass, (NO written Notice was given).

16. ON Dec. 14, 2016, plaintiff filed a grievance to Menard Admins - traction concerning above matter, and the response stated, "Admins - traction decision," (see exhibit 5). Plaintiff is currently appealing ~~it~~ to the Admins traction Review Board (ARB). However, the initial issue concerning his Weapon Violator/Staff Assaulters Status has been exhausted, (see Exhibit Information, ~~the~~ paragraphs 1-13 and 23-33 in the original Complaint). This issue is a continuation of the original Complaint. The totality of conditions add up to create an overall effect that is unconstitutional.

Whereby, plaintiff requests that this Supplemental Complaint be permitted to proceed as a Class action law suit - Not the original Complaint.

IV EXHAUSTION OF LEGAL REMEDIES

17. Plaintiff, Dennis Taylor exhausted all his prison's grievance procedures at: Stateville CC, the Administration Review Board, and FDOC-FOIA.

18. Please review Section, III FACTS, for the exhaustion dates, and the Exhibit information where the documents can be found in this petition to verify legal remedies exhaustion.

V LEGAL CLAIMS

19. Plaintiff reallege and incorporate by reference paragraphs 1-13 that:

20. The Neglect of equal protection, Significant hardship,

and different^{fat} treatment from other inmates has created a totality of conditions. This violates plaintiff, Dennis Taylor's right, and constitutes cruel and unusual punishment under the Eighth and Fourteenth Amendments to the United States Constitution.

21. The plaintiff has no plain adequate or complete remedy at law to redress the wrong described herein, plaintiff has been and will continue to be irreparably injured by the conduct of the defendants unless this Court grant the declaratory, injunctive, and class action relief which plaintiff seeks.

VI PRAYER FOR RELIEF

Whereby, plaintiff respectfully prays that this Court enter judgment granting plaintiff:

22. A declaratory that the acts and omissions described herein

Violated plaintiff's rights under the Constitution and law of the United States.

23. A preliminary and permanent injunction ordering defendants: Warden Randy Hister, Warden Jeffrey Hudchison, and Assistant Deputy Director Michael Alchison to not enforce the Weapon Violator / Staff Assaulters policy, where it is not rationally related to a legitimate government purpose.
24. Compensatory damage in the amount of \$ 5,000 dollars against each defendant, jointly and ~~severally~~ Severally.
25. Punitive damage in the amount of \$ 5,000 dollars against each defendant.
26. A jury trial on all issues triable by jury.
27. Plaintiff's cost in this suit.
28. Any additional relief this Court deems just, proper, and equitable.

29. Permit Plaintiff to have
Video / telephone Court appearance,
and not be wait to Court unless
for mandatory appearances.

Date: January 9, 2017
Respectfully Submitted

[Signature]
Plaintiff

#R68729

Case Number

P.O. Box 1000, Menard, IL, 62259
Address

VERIFICATION

I have read the foregoing Com-
plaint and hereto verify that the
matters alleged therein are true,
except as to matters alleged on
information and belief, and as to
those, I believe them to be true.
I solemnly under penalty of
perjury that the foregoing is true
and correct.

Subscribed and sworn to before me on the

18th day of January, 2017
[Signature]
Notary Public



UNITED STATES DISTRICT COURT, EASTERN
DIVISION, WILL COUNTY

DENNIS Taylor #R6879,
Plaintiff

COMPLAINT
Civil Action
No. _____

✓
INOC,

Randy Pfister, Warden-Stateville
Jeffery Hudchison, Warden-Menard
Michael Alderson, Asst. Deputy Dir., et al,
Defendants

PROOF OF SERVICE

Plaintiff, DENNIS Taylor, hereby Notify
the United States District Court that on
January 9, 2017, he mailed a copy of the
Civil Action Complaint, and Supplemental
Complaint in accord with 42 U.S.C Section
1983, to ILLINOIS Attorney General, Lisa Ma-
digan, 100 W. Randolph St., Chicago, IL, 60601, and
United States District Court Clerk. Plaintiff de-
posited above Complaints in Menard Corr. Center
mail system, and that first class postage
has been prepaid.

TO:

Office of Clerk of the
United State Dist Court
United States Court House
Chicago, Illinois, 60604

Attorney General,
Lisa Madigan,
100 W. Randolph St.
Chicago, Illinois 60601

I, DENNIS Taylor, declare under penalty of
perjury that the foregoing is true and correct.

[Signature]
Plaintiff
#R6879
Folio Number
P.O. Box 1000, Menard, IL 62259
Address
January 9, 2017
Date

DENNIS Taylor #R68729

COMPLAINT
CIVIL ACTION

No. _____

EXHIBITS

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: 1/18/2015 **Offender:** DENNIS TOPLER **ID#:** R68729
(Please Print)

Present Facility: Stateville Seg. **Facility where grievance issue occurred:**

NATURE OF GRIEVANCE:

☐ Personal Property ☐ Mail Handling ☐ Restoration of Good Time ☐ ADA Disability Accommodation
☐ Staff Conduct ☐ Dietary ☐ Medical Treatment ☐ HIPAA
☐ Transfer Denial by Facility ☐ Transfer Denial by Transfer Coordinator ☐ Other (specify) emergency

☐ Disciplinary Report: _____
Date of Report _____ Facility where issued _____

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:
Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
Chief Administrative Officer, only if **EMERGENCY** grievance.
Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved):
 I wrote placement and Seg. A death row requesting to be moved to another cell, because of my cellie (Peoples # R15695) continual threats against me. But, I have not been moved, and he is continually threatening to harm me.

Relief Requested: Need to be moved as soon as possible

☒ Check only if this is an **EMERGENCY** grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

Offender's Signature: _____ **ID#:** R68729 **Date:** 1/18/2015

(Continue on reverse side if necessary)

Counselor's Response (If applicable)

Date Received: ____/____/____ ☐ Send directly to Grievance Officer ☐ Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277

Response: _____

Print Counselor's Name Counselor's Signature Date of Response

EMERGENCY REVIEW

Date Received: ____/____/____ **Is this determined to be of an emergency nature?** ☐ Yes; expedite emergency grievance
☐ No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.

Chief Administrative Officer's Signature Date

ILLINOIS DEPARTMENT OF CORRECTIONS

**Administrative Review Board
Return of Grievance or Correspondence**

Offender: Taylor Dennis R68729
Last Name First Name MI ID#

Facility Stateville CC

☒ Grievance: Facility Grievance # (if applicable) 908 not provided Dated: 2/8/16 Correspondence Dated: _____

Received: 3/23/16 Regarding: Requests PC
Date

The attached grievance or correspondence is being returned for the following reasons:

Additional information required:

- ☐ Provide a copy of your Counselor's response.
- ☐ Provide a copy of the Response to Offender's Grievance, DOC 0047, including the Grievance Officer's and Chief Administrative Officer's response, to appeal.
- ☐ Provide dates of disciplinary reports and facility where incidents occurred.
- ☐ Unable to determine nature of grievance or correspondence; submit additional specific information. Please return the attached grievance or correspondence with the additional information requested to:

Administrative Review Board
Office of Inmate Issues
1301 Concordia Court
Springfield, IL 62794-9277

Misdirected:

- ☐ Contact your correctional counselor regarding issue.
- ☐ Request restoration of Statutory Sentence Credits to Adjustment Committee. If the request is denied by the facility, utilize the offender grievance process outlined in Department Rule 504 for further consideration.
- ☐ Contact the Record Office with your request or to provide additional information.
- ☐ Personal property issues are to be reviewed at your current facility prior to review by the Administrative Review Board.
- ☐ Address concerns to: Illinois Prisoner Review Board
319 E. Madison St., Suite A
Springfield, IL 62706

No further redress:

- ☐ Award of Supplemental Sentence Credits are discretionary administrative decisions; therefore, this issue will not be addressed further.
- ☐ Not submitted in the timeframe outlined in Department Rule 504; therefore, this issue will not be addressed further.
- ☐ This office previously addressed this issue on _____
Date
- ☒ No justification provided for additional consideration.

Other (specify) Offender is currently in PC.

Completed by: Leslie McCarty
Print Name

Leslie McCarty
Signature

4/16/16
Date

Distribution: Offender
Inmate Issues

Printed on Recycled Paper

DOC 0070 (Rev.4/2013)

Exhibit B

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

GRIEVANCE OFFICE

Date: <u>2/8/2016</u>	Offender: <u>Dennis Taylor</u> (Please Print)	FEB 24 2016	ID#: <u>R68729</u>
Present Facility: _____		Facility where grievance issue occurred: <u>STATE 908</u>	
FEB 24 2016			
NATURE OF GRIEVANCE:			
<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time	<input type="checkbox"/> ADA Disability Accommodation
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input type="checkbox"/> Medical Treatment	<input type="checkbox"/> HIPAA <u>STATE</u>
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator		<input type="checkbox"/> Other (specify): _____
<input type="checkbox"/> Disciplinary Report: <u>2/28/2016 Stateville, Ticket # 201600323/KSF</u> (hearing date) Facility where issued			
Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.			
Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board. Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.			
Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved): <u>I was issued a disciplinary report for fighting (30D) with inmate Peoples #K51699, where NO altercation took place - I was assaulted by Peoples. He placed his fan motor in a pillow case and struck me on the head several times after an argument. He told me that if I told the police what happened, he would have his mob put a hit on me. I was rushed to an outside hospital, and had 38 staples put in my head (OVER)</u> Relief Requested: <u>(Request ON Back side)</u>			
<input type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.			
<u>[Signature]</u> Offender's Signature		<u>R68729</u> ID#	
(Continue on reverse side if necessary)			
MAR 23 2016			
Counselor's Response (if applicable)			
Date Received: <u>3/17/16</u>		<input type="checkbox"/> Send directly to Grievance Officer	
<input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 18277, Springfield, IL 62794-8277			
Response: <u>Offender Peoples has been added to your KSF list you are currently group 4 P.C.</u>			
<u>T. Butler</u> Print Counselor's Name		<u>T. Butler</u> Counselor's Signature	
		<u>3/17/16</u> Date of Response	
EMERGENCY REVIEW			
Date Received: <u>1/1</u>		Is this determined to be of an emergency nature?	
		<input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.	
_____ Chief Administrative Officer's Signature		_____ Date	

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I did not tell Stateville officials about the assault until several weeks later, because I feared for my life. I had to sign into P.C. because after I revealed the assault to officials, my life has been constantly threatened by People's Mob.

Relief Requested: to have the assault offense placed in People's file to make the institution aware of his violent nature, and get approved for P.C. because after I revealed the assault to officials, my life has been constantly threatened by his Mob.

END OF REPORT

ILLINOIS DEPARTMENT OF CORRECTIONS
HEARING OF ADMINISTRATIVE REVIEW BOARD

DATE OF HEARING: April 20, 2016

INSTITUTION: Stateville Correctional Center

GRIEVANT NAME: Dennis Taylor, Register No. R68729 X-UE-08

BOARD MEMBERS PRESENT: Sarah Johnson, Administrative Review Board Chairperson, Office of Inmate Issues, Department of Corrections.

Grievant was personally interviewed by the Administrative Review Board. All information submitted to the Board by the Grievant, and the institution related to the issue being grieved, was reviewed. Issues warranting further action / consideration were discussed with the Stateville Correctional Center administration.

Nature of Grievance: Inmate Taylor is grieving denial of Protective Custody.

Findings: The Board notes the inmate is currently serving a Life sentence for Murder, 28 years for Aggravated Unlawful Restraint. Records reflect an admission date of February 25, 2008.

Grievant has been housed at the Stateville Correctional Center since February 25, 2008. No affiliation with STG is noted. The grievant has one offender listed as keep separate from at Stateville.

The Board reviewed the Protective Custody Status sheet dated January 6, 2016. Grievant requested Protective Custody stating: "I was in an argument with my cellmate, Peoples, when he called me a bitch then I told him he was acting like a bitch. He took his disconnected fan motor and put it in a pillow case and hit me on the head several times. I attempted to grab the pillow case so he would not hit me again, and he struck me again on the head. I felt the deep cuts on my head and told him I needed to go to the hospital and I was going to report it to the officials. He told me if I did he was going to have his mob put a hit on me. I was rushed to the outside hospital and had 38 staples put in my head."

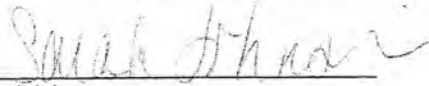
In accordance with DR501, Stateville Correctional Center conducted a review of the offender's PC request. Upon completion of the review it was recommended to which the CAO concurred with the denial for Protective Custody placement on February 24, 2016.

Inmate's statement to ARB: In November, 2015 he and his cellie argued and he was assaulted by Offender Peoples. Offender Peoples said he would tell his "mob" to put a hit on him if he told what happened. He (Peoples) told him to say he fell and he did. After being placed in the hospital, he was placed in segregation and received a ticket. Later his ticket was expunged. He states Esteel in F house told him where ever he (Taylor) goes carry out a hit on him. He stated while in the healthcare unit Spree told him "we got something for you when you get to general population".

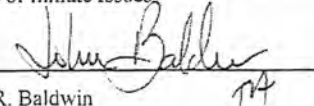
This office notes Offender Peoples is on Offender Taylor's keep separate from list. There is no verification to indicate an additional issue.

Recommendations: Based on a review of all information, it is the opinion of the Board that there is not sufficient information to warrant the offender's retention in Protective Custody and therefore should be released to general population.

FOR THE BOARD:


Sarah Johnson
Administrative Review Board Chairperson
Office of Inmate Issues

CONCURRED:


John R. Baldwin
Acting Director

cc: Warden, Stateville Correctional Center
Dennis Taylor, Register No. R68729

EXHIBIT B

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

X-UE-7

Date: <u>4/27/2016</u>	Offender: (Please Print) <u>NENNIS Taylor</u>	ID#: <u>R68729</u>
Present Facility: <u>Stateville</u>		Facility where grievance issue occurred:

NATURE OF GRIEVANCE:

<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time	<input type="checkbox"/> ADA Disability Accommodation
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input type="checkbox"/> Medical Treatment	<input type="checkbox"/> HIPAA
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input type="checkbox"/> Other (specify): <u>CONTINUED A.C.</u>	

☐ Disciplinary Report: _____ Date of Report _____ Facility where issued _____

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:
 Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
 Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
 Chief Administrative Officer, only if EMERGENCY grievance.
 Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved):
When I was interviewed by I.O.A and the Administration Review Board, I informed them of the inmates (Estel & Guerrilla) whom threaten to harm me when they catch up with me. Because, I informed I.O.A. that one of their mob members (Peoples) assaulted me, and caused me to go to the outside hospital to get 38 staples in my head. (CONTINUE ON back)

Relief Requested:
(Relief requested also on back)

☐ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

NENNIS Taylor R68729 4/27/2016
 Offender's Signature ID# Date
 (Continue on reverse side if necessary)

Counselor's Response (if applicable)	
Date Received: <u>5/5/16</u>	<input type="checkbox"/> Send directly to Grievance Officer
Response: <u>Once P.C. decisions reach the A.R.B. it is out of the institution's jurisdiction.</u>	
<u>J. Butler-Winters</u> Print Counselor's Name	<u>J. Butler-Winters</u> Counselor's Signature
<u>6/6/16</u> Date of Response	

EMERGENCY REVIEW	
Date Received: <u>1/1</u>	Is this determined to be of an emergency nature?
<input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.	
_____ Chief Administrative Officer's Signature	_____ Date

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I was denied protective custody by I.A. and A.R.B. I have an appeal/grievance pending with the A.R.B. concerning permanent P.C. I am currently in black & white. Estel is also in stripes, and is housed in F-house, along with Guerrilla & Peoples. I.A. did not note neither Estel nor Guerrilla on my keep separate list, and there's a chance that I may come in contact with either of them when I go to F-house.

Relief Requested: That I be held in P.C. until my grievance concerning protective custody is ruled on by Springfield or the Court.

END OF Report

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

X JE 02

Date: <u>5/1/2016</u>	Offender: <u>DENNIS TAYLOR</u> <small>(Please Print)</small>	ID#: <u>R68729</u>
Present Facility: <u>Stateville</u>		Facility where grievance issue occurred: _____
MAY 04 2016		
NATURE OF GRIEVANCE:		
<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input type="checkbox"/> Medical Treatment
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input type="checkbox"/> ADA Disability Accommodation
<input type="checkbox"/> Disciplinary Report: _____	Date of Report: _____	Facility where issued: _____
<input type="checkbox"/> HIPAA <input checked="" type="checkbox"/> Other (specify): <u>Safety Conditions</u>		
<p>Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.</p> <p>Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board. Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.</p>		
<p>Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved):</p> <p><u>Warden Randy P. Steen</u> <u>I was assaulted by my Cellmate, Peoples #151695</u> <u>on 11/27/2015 in F-house, Cell #154. I was taken to</u> <u>the outside hospital, and received 38 staples in</u> <u>my head. Peoples threatened that if I told the police</u> <u>about what happened, he would have his mob</u> <u>(G.O.'s) hit me. I informed F.A. (weeks later) of</u> <u>the assault, and after Peoples was questioned</u> <u>about it, he told his mob that I switched</u> <u>on him. (continue on back)</u></p> <p>Relief Requested: <u>(on back)</u></p>		
<input checked="" type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.		
<u>[Signature]</u> Offender's Signature		<u>R68729</u> ID# <u>5/1/2016</u> Date

(Continue on reverse side if necessary)

Date Received: _____	Counselor's Response (if applicable)
<input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277	Response: _____ _____ _____ _____ _____
Print Counselor's Name _____	Counselor's Signature _____ Date of Response _____

EMERGENCY REVIEW	
Date Received: <u>5.4.16</u>	Is this determined to be of an emergency nature? <input type="checkbox"/> Yes; expedite emergency grievance <input checked="" type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
<u>[Signature]</u> Chief Administrative Officer's Signature	<u>5.5.16</u> Date

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I was told by Peoples, Estelle, and Gurrell or (G.D.'S), while in Segregation, that when they catch up with me, they will harm me. The Administrative Review Board, and I.A. have been made aware of the threats. On April 29, 2016, while I was being transferred from X-house (P.C.) to F-house, Peoples was in F-house holding cage. When he ~~saw~~ me, he told me that he was going to finish where he left off, and if he didn't get the chance, his not will, for snitching on him. Since then I was told by G.D. mob members: G-Bally, Big Tore, & Wham that they knew I snitched on Peoples, and after they're done with me, I won't be able to snitch on any one else. The above G.D.'S are strippers (except Peoples) and since I'm a stripper too, we come in contact with one another when we go to the dining room, yard, & commissary. They told me that since I am a newbie (not affiliated) the best thing I could do before they kill me, is to go into P.C., where my kind belongs. I came in contact with these G.D. Strippers daily. These inmates have a history of keeping deadly weapons and assaults. I have been placed directly in contact with the G.D. mob when threatened to kill me.

Relief Requested: To be placed immediately into protective custody.
END OF REPORT

Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

Stateville Correctional Center
Route 53, P.O. Box 112 • Joliet, IL 60434 • (815) 727-3607 TDD: (800) 526-0844

June 14, 2016

Inmate: Dennis Taylor- R68729- X-UW-07

RE: Inmate Issues- P.C

Dear Mr. Taylor:

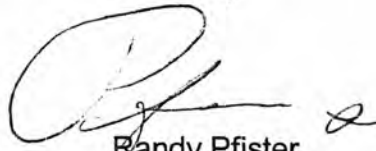
Your recent correspondence to the Director's Office regarding several issues or concerns has been forwarded to me for response. Your concerns have been reviewed and referred to the appropriate individuals for resolution.

The safety and security of offenders, staff and the general public is of utmost importance to everyone within the department. Therefore policies and procedures have been implemented with that goal in mind.

You currently are celled in Protective Custody and awaiting the decision of the Administrative Review Board as to whether a verifiable need exists for you to remain in PC status. Please continue to follow the 504 procedure with regard to this matter.

I trust this is responsive to your request.

Sincerely


Randy Pfister
Warden

RP/jal

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Exhibit D

ILLINOIS DEPARTMENT OF CORRECTIONS

Administrative Review Board
Return of Grievance or CorrespondenceOffender: Taylor Dennis RL8729
Last Name First Name MI ID#Facility: Stateville☒ Grievance; Facility Grievance # (if applicable) NOT PROVIDED Dated: 5/1/16 or ☐ Correspondence: Dated: _____Received: 5/6/16 Regarding: PC - Has safety concerns against offender Peoples
DateThe attached grievance or correspondence is being returned for the following reasons: K51695

Additional information required:

- ☐ Provide a copy of your written Offender's Grievance, DOC 0046, including the counselor's response, if applicable.
- ☐ Provide a copy of the Response to Offender's Grievance, DOC 0047, including the Grievance Officer's and Chief Administrative Officer's response, to appeal.
- ☐ Provide dates of disciplinary reports and facility where incidents occurred.
- ☐ Unable to determine nature of grievance or correspondence; submit additional specific information. Please return the attached grievance or correspondence with the additional information requested to: Administrative Review Board
Office of Inmate Issues
1301 Concordia Court
Springfield, IL 62794-9277

Misdirected:

- ☐ Contact your correctional counselor regarding this issue.
- ☐ Request restoration of Statutory Sentence Credits to Adjustment Committee. If the request is denied by the facility, utilize the offender grievance process outlined in Department Rule 504 for further consideration.
- ☐ Contact the Record Office with your request or to provide additional information.
- ☐ Personal property issues are to be reviewed at your current facility prior to review by the Administrative Review Board.
- ☐ Address concerns to: Illinois Prisoner Review Board
319 E. Madison St., Suite A
Springfield, IL 62706

No further redress:

- ☐ Award of Supplemental Sentence Credits are discretionary administrative decisions; therefore, this issue will not be addressed further.
- ☐ Not submitted in the timeframe outlined in Department Rule 504; therefore, this issue will not be addressed further.
- ☐ This office previously addressed this issue on _____ Date
- ☐ No justification provided for additional consideration.

Other (specify):

offender needs to contact his counselor and
T/A regarding protective custody issuesCompleted by: Leslie McCarty
Print NameLeslie McCarty
Signature6/3/16
DateDistribution: Offender
Inmate Issues

Printed on Recycled Paper

DOC 0070 (Rev.4/2013)

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: <u>5/1/2016</u>	Offender: <u>DENNIS TAYLOR</u> (Please Print)	ID#: <u>R68729</u>
Present Facility:		Facility where grievance issue occurred:
NATURE OF GRIEVANCE: <input type="checkbox"/> Personal Property <input type="checkbox"/> Mail Handling <input type="checkbox"/> Restoration of Good Time <input type="checkbox"/> ADA Disability Accommodation <input type="checkbox"/> Staff Conduct <input type="checkbox"/> Dietary <input type="checkbox"/> Medical Treatment <input type="checkbox"/> HIPAA <input type="checkbox"/> Transfer Denial by Facility <input type="checkbox"/> Transfer Denial by Transfer Coordinator <input checked="" type="checkbox"/> Other (specify): <u>Safety</u> <u>Condo band 5 PC</u> <input type="checkbox"/> Disciplinary Report: _____ <div style="display: flex; justify-content: space-between;"><div>Date of Report</div><div>Facility where issued</div></div>		
<p>Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.</p> <p>Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board. Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.</p>		
<p>Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved):</p> <p><u>Director John Baldwin, I was assaulted by my cellmate, Peoples #K51695 on 11/27/2015 in F-house, cell #154. I was taken to the out side hospital, and received 38 staples on my head. Peoples threatened that if I told the police about what happened, he would have his mob (B.O.A's) hit me. I informed I.O.A. (weeks later) of the assault, and after Peoples was questioned about it.</u></p> <p>Relief Requested: <u>(Continue on additional pages)</u> <u>(page 1)</u></p>		
<input checked="" type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.		
<u>Dennis Taylor</u> Offender's Signature		<u>R68729</u> ID# <u>5.1.2016</u> Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">RECEIVED</div>

Counselor's Response (if applicable)		MAY 10 2016
Date Received: _____	<input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277	ADMINISTRATIVE REVIEW BOARD
Response: _____		

Print Counselor's Name	Counselor's Signature	Date of Response

EMERGENCY REVIEW	
Date Received: _____	Is this determined to be of an emergency nature?
	<input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
Chief Administrative Officer's Signature	Date

he told his mob that I snatched on him. I was told by Peoples, Estelle, & Gurrella (G.O.'s), while in Segregation, that when they catch up with me, they will ~~harm~~ harm me. The Administrative Review Board, and I.A. have been informed of the threats. ON April 29, 2016, while I was being transferred from X-house (P.C.) to F-house, Peoples was in F-house holding cage. When he saw me, he told me that he was going to finish where he left off, and if he don't get it done, his mob will, for snatching on him. Since then, I was told by G.O. mob members: G. Bally, Big Tone, & Wham that they know I snatched on Peoples, and after they're done with me, I won't be able to snatch on any one else. The above G.O.'s are strippers (except Peoples & Gurrella) and since I am a Stripper too, we come in contact with one another when we go to the dining room, yard, & commissary. They told me that since I am a neutrone (not affiliated) the best thing I could do before they kill me, is to sign into P.C., where my kind belong. People and his mob have ~~continually~~ threatened to harm me.

MAY 03 2016

ADMINISTRATIVE
REVIEW BOARD

EXHIBIT E

(2) [Continual grievance]

RECEIVED

ADMINISTRATIVE

ADMINISTRATIVE (3) [Continual grievance]

The question under the 8th Amendment is whether prison officials acting with deliberate indifference, exposed a prisoner to sufficiently substantial risk of serious damage to his future health. 22 Hellwig at 55.

Stateville officials are aware that a G.O.D. mob member (Peoples) assaulted me. The Warden and I.A. have been given additional names of G.O.D.'s whom continue to threaten my life. A number of them are strikers, and I come in daily contact with them. These inmates have a history of assaults, and often get tickets for deadly weapons. I have been placed directly in contact with these inmates.

Relief Requested: To be placed in permanent protective custody.

I, Dennis Tucker declare under penalty of perjury that the foregoing is true and correct.

CC:

Governor Bruce Rauner
I.A. Supervisor Turner
I.A. Supervisor Sullivan
Llo Brown
Prisoners Officer
K. Rabedeau
Personal File

Dennis Tucker
Inmate/Complainant
R 68729
I.A. Number
P.O. Box 112, Joliet, IL 60434

Address

EXHIBIT E

(4) [Continual grievance]

RECEIVED

MAY 02 2016

ADMINISTRATIVE
REVIEW BOARD

F
Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

June 15, 2016

Dennis Taylor
Register No. R68729
Stateville Correctional Center

X-UW-07

Dear Mr. Taylor:

This is in response to your recent request for Protective Custody placement. In accordance with DR501D, the Stateville Correctional Center administration notified you your request for protective custody was denied May 12, 2016. This office has determined the issue will be addressed without a formal hearing.

Prior reviews have been conducted by the Administrative Review Board relative to the denial of protective custody placement while at the Stateville Correctional Center. The Director denied the requests for protective custody placement each time.

In your recent request dated May 2, 2016, you state on 11/27/15 you were assaulted by your cellmate Peoples K51695. You state Peoples threatened that if you told the police he would have his mob (GD's) hit you. This is essentially the same reason as in the past requests; which was not confirmed.

In reviewing all the materials as well as information provided by the Stateville Correctional Center, I find no new information which would warrant a reconsideration of the past Administrative Review Board hearings.

There is no information to support the allegation of safety concerns. Offender Taylor has spent less than 30 days in general population since his last protective custody review April 20, 2016 as Offender signs back in upon release with no additional concerns or information being provided.

Therefore, this office recommends Offender Taylor request for Protective Custody placement be denied and he be returned to general population.

FOR THE BOARD:

Debbie Knauer
Debbie Knauer
Administrative Review Board
Office of Inmate Issues

CONCURRED:

John R. Baldwin
John R. Baldwin
Acting Director

cc: Warden, Stateville Correctional Center
Taylor, Dennis Register No. R68729

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Exhibit F

ILLINOIS DEPARTMENT OF CORRECTIONS

**Administrative Review Board
Return of Grievance or Correspondence**

Offender:

Taylor
Last NameDennis
First Name

MI

RL8729
ID#

Facility:

Stateville

☒ Grievance: Facility Grievance # (if applicable)

NOT PROVIDED

Dated:

7/12/16

or ☐ Correspondence: Dated:

Received:

8/1/16
Date

Regarding:

Safety & Security - Receiving Threats from Inmate Peoples

The attached grievance or correspondence is being returned for the following reasons:

Additional information required:

- ☐ Provide a copy of your written Offender's Grievance, DOC 0046, including the counselor's response, if applicable.
- ☐ Provide a copy of the Response to Offender's Grievance, DOC 0047, including the Grievance Officer's and Chief Administrative Officer's response, to appeal. **IF TIMELY**
- ☐ Provide dates of disciplinary reports and facility where incidents occurred.
- ☐ Unable to determine nature of grievance or correspondence; submit additional specific information. Please return the attached grievance or correspondence with the additional information requested to:

Administrative Review Board
Office of Inmate Issues
1301 Concordia Court
Springfield, IL 62794-9277

Misdirected:

- ☐ Contact your correctional counselor regarding this issue.
- ☐ Request restoration of Statutory Sentence Credits to Adjustment Committee. If the request is denied by the facility, utilize the offender grievance process outlined in Department Rule 504 for further consideration.
- ☐ Contact the Record Office with your request or to provide additional information.
- ☐ Personal property issues are to be reviewed at your current facility prior to review by the Administrative Review Board.
- ☐ Address concerns to: Illinois Prisoner Review Board
319 E. Madison St., Suite A
Springfield, IL 62706

No further redress:

- ☐ Award of Supplemental Sentence Credits are discretionary administrative decisions; therefore, this issue will not be addressed further.
- ☒ Not submitted in the timeframe outlined in Department Rule 504; **therefore, this issue will not be addressed further.**
- ☐ This office previously addressed this issue on _____ Date _____
- ☐ No justification provided for additional consideration.

Other (specify):

Grievances dated 1/18/15 & 2/18/16 are 60 days past time frame without facility response

Completed by: Leslie McCarty

Print Name

Leslie McCarty LM

Signature

8/4/16

Date

Distribution: Offender
Inmate Issues

Printed on Recycled Paper

DOC 0070 (Rev. 4/2013)

EXHIBIT G

filed copy

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: <u>7/2/16</u>	Offender: <u>Dennis Taylor</u> (Please Print)	ID#: <u>R68729</u>
Present Facility: <u>Starleville CC</u>		Facility where grievance issue occurred:
NATURE OF GRIEVANCE: <input type="checkbox"/> Personal Property <input type="checkbox"/> Mail Handling <input type="checkbox"/> Restoration of Good Time <input type="checkbox"/> ADA Disability Accommodation <input type="checkbox"/> Staff Conduct <input type="checkbox"/> Dietary <input type="checkbox"/> Medical Treatment <input type="checkbox"/> HIPAA <input type="checkbox"/> Transfer Denial by Facility <input type="checkbox"/> Transfer Denial by Transfer Coordinator <input checked="" type="checkbox"/> Other (specify): <u>unanswered grievance</u> <input type="checkbox"/> Disciplinary Report: _____ Date of Report: _____ Facility where issued: _____		
Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification. Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to: Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board, Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor. Chief Administrative Officer, only if EMERGENCY grievance. Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.		
Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved): <u>To Administrative Review Board: I submitted a grievance to F-house Counselor on 1/18/15 that complained about Sgt. Deathrow and placement not responding to my request to be moved out of the cell with inmate Peoples #K51695, after he had threatened to harm me several times. After not receiving a response to said grievance (continue) on back</u>		
Relief Requested: _____ <input type="checkbox"/> Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.		
<u>[Signature]</u> Offender's Signature		<u>R68729</u> ID#
		<u>7.2.16</u> Date
(Continue on reverse side if necessary)		
Counselor's Response (if applicable)		
Date Received: _____ <input type="checkbox"/> Send directly to Grievance Officer <input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277		
Response: _____ _____ _____ _____		
_____ Print Counselor's Name		_____ Counselor's Signature
		_____ Date of Response
EMERGENCY REVIEW		
Date Received: _____ Is this determined to be of an emergency nature? <input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.		
_____ Chief Administrative Officer's Signature		_____ Date

Exhibit G

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I sent another grievance, while in X-house (P.C.) to Counselor Butkie-Wick on 2/8/16 concerning P.C. and ~~the~~ my unanswered grievances. I did not receive a reply from either counselors. So, I sent a third grievance to Counselor Winters on 7/12/16 asking her to find out the result of the unanswered grievances I sent on the above dates. See attached grievance.

Relief Requested: To find out why my grievances have not been answered concerning the above matters, within a reasonable time.

END OF REPORT

file copy

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

X-UW-2

Date: <u>7/12/16</u>	Offender: <u>DENNIS Taylor</u> (Please Print)	ID#: <u>R68729</u>
Present Facility: <u>Stateville</u>	Facility where grievance issue occurred:	

NATURE OF GRIEVANCE:

<input type="checkbox"/> Personal Property	<input type="checkbox"/> Mail Handling	<input type="checkbox"/> Restoration of Good Time	<input type="checkbox"/> ADA Disability Accommodation
<input type="checkbox"/> Staff Conduct	<input type="checkbox"/> Dietary	<input type="checkbox"/> Medical Treatment	<input type="checkbox"/> HIPAA
<input type="checkbox"/> Transfer Denial by Facility	<input type="checkbox"/> Transfer Denial by Transfer Coordinator	<input checked="" type="checkbox"/> Other (specify): <u>grievance Follow-up</u>	

☐ Disciplinary Report: _____ Date of Report: _____ AUG 01 2016 Facility where issued: _____

Note: Protective Custody Denials may be grieved immediately with the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:

Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
Chief Administrative Officer, only if EMERGENCY grievance.
Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Summary of Grievance (Provide information including a description of what happened, when and where it happened, and the name or identifying information for each person involved):

ON 2/18/16 I sent a grievance to Counselor Butkiewicz in X-house P.O. requesting permanent protection because of the repeated threats I received from inmate Peoples #K51695 and his mob. The grievance also complaint that I had not received a respond to the grievance I sent out from F-house on 1/18/15 about Sgt. Deathrow -

Relief Requested: (Continue on back)

☐ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

[Signature] R68729 7.12.16
Offender's Signature ID# Date
(Continue on reverse side if necessary)

Counselor's Response (if applicable)		
Date Received: <u>7.20.16</u>	<input type="checkbox"/> Send directly to Grievance Officer	<input type="checkbox"/> Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-8277
Response: <u>Per Grievance Officer, that grievance was returned to the Counselor on 2/28/16 to address the issues it was never returned to their office</u>		
<u>T. Butler-Winters</u> Print Counselor's Name	<u>[Signature]</u> Counselor's Signature	<u>7.20.16</u> Date of Response

EMERGENCY REVIEW	
Date Received: <u>1 1</u>	Is this determined to be of an emergency nature? <input type="checkbox"/> Yes; expedite emergency grievance <input type="checkbox"/> No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.
Chief Administrative Officer's Signature	Date

Exhibit G

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

and placement not responding to my request to be moved out of the cell with Peoples because of the threats he placed on my life. It has been over five months and I need to know what happened with the grievance before I can appeal it to Springfield.

Relief Requested: - to find out the result of the grievance I sent to Counselor Bulkework on 2/8/16.

END OF REPORT

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

X-UW 02

Date: 8/8/16 **Offender:** DENNIS TAYLOR **ID#:** K68729

Present Facility: Stateville CC **Facility where grievance issue occurred:**

NATURE OF GRIEVANCE:

☐ Personal Property ☐ Mail Handling ☐ Restoration of Good Time ☐ Disability

☐ Staff Conduct ☐ Dietary ☐ Medical Treatment ☐ HIPAA

☐ Transfer Denial by Facility ☐ Transfer Denial by Transfer Coordinator ☒ Other (specify): have Goll's placed on my KS list

☐ Disciplinary Report: _____ **Date of Report:** AUG 19 2016 **Facility where issued:** STATE 3188

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:

Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.

Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.

Chief Administrative Officer, only if **EMERGENCY** grievance.

Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Brief Summary of Grievance: Warden Pfister, I sent a PoCo request + grievance to my PoCo Counselor that addressed my request for PoCo (See attached request). She informed me that my PoCo denial by Stateville will be reviewed by AFR. She also informed me that my request to have Sudd Goll's placed on my keep separate list should be addressed with IAT and this is not a burden. (over) see also attached letter

Relief Requested: Have the Goll's Whom Names are attached to this grievance placed on my keep separate list, immediately.

☒ Check only if this is an **EMERGENCY** grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

Offender's Signature: _____ **ID#:** K68729 **Date:** 8.8.16

(Continue on reverse side if necessary)

Counselor's Response (if applicable)

Date Received: _____ ☐ Send directly to Grievance Officer ☐ Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277

Response: _____

Print Counselor's Name: _____ **Counselor's Signature:** _____ **Date of Response:** _____

EMERGENCY REVIEW

Date Received: 8.10.16 **Is this determined to be of an emergency nature?** ☐ Yes; expedite emergency grievance ☒ No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.

Chief Administrative Officer's Signature: _____ **Date:** 8.11.16

Exhibit H

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I reported the specific names of the G-1's behind these threats on my list, and to my knowledge, the matter has not been investigated nor have any of the G-1's (except Peoples) been placed on my piece separate lists. See attached PLO Request Affidavit to end report.

PROTECTIVE CUSTODY REQUEST / AFFIDAVIT

ON June 30, 2016, I was released from P.C. back into general population (F-house). While moving into Cell #442, G.D. (Gangster Disciple) members: G Ball, Estelle, Big Tone, Whani, and a few other G.D.'s yelled from their cells, and told me that "If you don't sign your ass back into P.C. today (6/30/16) you're a dead man." These threats and intimidation started after I was assaulted by one of its members (People #K51695) on 11/27/15. This is my third time signing into P.C. because of the repeated threats on my life from the G.D.'s that I come in direct contact with for we are all stripers. However, none of the above G.D.'s (except Peoples) have been placed on my keep separate list even though, I've reported the specific mob, and individuals behind these threats, to IDOC officials. This deliberate indifference for my safety is exposing me to serious harm, and risk of being assaulted again by a G.D. Because, each time the administration and ARB released me back into general population, I come into direct contact with the above individuals and its mob whom continues to threaten to carry out a hit on me for snitching on one of its member (Peoples).

cc:

Director (acting) John Baldwin
 Warden Randy Pfister
 IA Supervisor Tamen
 IA Supervisor Sullivan
 ARB Review Members:
 Super. Terry Anderson,
 Sarah Johnson, Lode
 McCarty, Debbie Knauer
 Placement Officer:
 Karen Rabideau
 P.C. Review Counselor:
 T. Butler Winters
 Personal File

I, DENNIS Taylor, declare under penalty of perjury that the foregoing is true and correct.

Dennis Taylor
 Inmate / Complainant
 R68729

Feld. Number
P.O. Box 112, Joliet, IL 60431
Address

8/8/2016

Date Submitted

EXHIBIT H1

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE

Date: 8/15/2016 **Offender:** Dennis Taylor **ID#:** R68729

Present Facility: **Facility where grievance issue occurred:**

NATURE OF GRIEVANCE:

☐ Personal Property ☐ Mail Handling ☐ Restoration of Good Time ☐ Disability

☐ Staff Conduct ☐ Dietary ☐ Medical Treatment ☐ HIPAA

☐ Transfer Denial by Facility ☐ Transfer Denial by Transfer Coordinator ☒ Other (specify): *Have Gd's placed on my KS list*

☐ Disciplinary Report: _____ Date of Report: _____ Facility where issued: _____

Note: Protective Custody Denials may be grieved immediately via the local administration on the protective custody status notification.

Complete: Attach a copy of any pertinent document (such as a Disciplinary Report, Shakedown Record, etc.) and send to:

Counselor, unless the issue involves discipline, is deemed an emergency, or is subject to direct review by the Administrative Review Board.
Grievance Officer, only if the issue involves discipline at the present facility or issue not resolved by Counselor.
Chief Administrative Officer, only if EMERGENCY grievance.
Administrative Review Board, only if the issue involves transfer denial by the Transfer Coordinator, protective custody, involuntary administration of psychotropic drugs, issues from another facility except personal property issues, or issues not resolved by the Chief Administrative Officer.

Brief Summary of Grievance: *I sent a P.C. request for grievance to my P.C. Counselor that addressed my reason for P.C. and the below issue. She informed me that my Stakeville's P.C. will be reviewed by ARB. I am currently awaiting its decision. She also informed me that my request to have Gd's placed on my KS list (see attached copy) should be addressed with I.A. and the administrative board. (Continue on back)*

Relief Requested: *Have the Gd's when names are attached to this grievance placed on my KS list.*

☐ Check only if this is an EMERGENCY grievance due to a substantial risk of imminent personal injury or other serious or irreparable harm to self.

[Signature] **ID#** R68729 **Date** 8.15.16

(Continue on reverse side if necessary)

Counselor's Response (if applicable)

Date Received: 8.22.16 ☐ Send directly to Grievance Officer ☐ Outside jurisdiction of this facility. Send to Administrative Review Board, P.O. Box 19277, Springfield, IL 62794-9277

Response: *Per Intel, your request has been received and will be processed in the order of receipt*

J. Butler-Winters **Print Counselor's Name** *J. Butler-Winters* **Counselor's Signature** *8.22.16* **Date of Response**

EMERGENCY REVIEW

Date Received: _____ **Is this determined to be of an emergency nature?** ☐ Yes; expedite emergency grievance ☐ No; an emergency is not substantiated. Offender should submit this grievance in the normal manner.

Chief Administrative Officer's Signature **Date** _____

Exhibit I

ILLINOIS DEPARTMENT OF CORRECTIONS
OFFENDER'S GRIEVANCE (Continued)

I sent an emergency grievance to the warden on 8/28/16 and it was returned marked "No: Emergency" I've reported the specific names of the GPs behind these threats on my life, and to my knowledge, the matter has not been investigated. Nor have any of the GPs (except Peoples) been placed on my keep ~~separate~~ separate list.
End of Report

3

ILLINOIS DEPARTMENT OF CORRECTIONS
HEARING OF ADMINISTRATIVE REVIEW BOARD
VIDEO CONFERENCE

DATE OF HEARING: August 15, 2016

INSTITUTION: Stateville Correctional Center, Crest Hill, Illinois

GRIEVANT NAME: Dennis Taylor, Register No. R68729

BOARD MEMBERS PRESENT: Sherry Benton, Administrative Review Board Chairperson, Office of Inmate Issues, Department of Corrections.

Grievant was personally interviewed by the Administrative Review Board. All information submitted to the Board by the Grievant, and the institution related to the issue being grieved, was reviewed. Issues warranting further action / consideration were discussed with the Stateville Correctional Center administration.

Nature of Grievance: Offender Taylor is grieving denial of protective custody.

Findings: The Board notes the offender is currently serving a Life sentence (Direct From Court 2/25/08). The Grievant has been housed at Stateville Correctional Center ever since.

An affiliation with an STG is not noted. The Board notes Grievant has declared the following enemies currently at Stateville: Christopher Peoples K51695. The Grievant has been declared as an enemy (currently incarcerated within Stateville) by: no one.

The Board reviewed the Protective Custody vote sheet. Grievant requested Protective Custody placement, stating the following (in summary): on June 30th, while moving from PC (kick out), some G.D.'s told me that if I didn't sign my ass back in, that I was a dead man. The no-vote rationale indicates no sufficient verifiable information to warrant continued Protective Custody placement. The CAO concurred on July 28, 2016.

Offender's statement to ARB: You should have copies of my affidavits. Everything that's stated in there is my statement. I just had threats yesterday. If I come out of PC they will get me. Please refer to my affidavits for all questions. *This office reviewed Taylor's affidavits.*

This office contacted Stateville Intel Staff regarding Taylor's claims.

Recommendations: Based on a total review of all available information, it is the opinion of the Board that the Grievant has not provided sufficient verifiable information to warrant the offender's retention in Protective Custody, and therefore, should be placed back into general population. While at Stateville, Warden is to ensure Taylor is kept separate from his declared enemies.

FOR THE BOARD:

Sherry Benton
Sherry Benton
Administrative Review Board Chairperson
Office of Inmate Issues

CONCURRED:

John R. Baldwin
John R. Baldwin
Acting Director

August 15, 2016

cc: Warden, Stateville Correctional Center
Dennis Taylor, Register No. R68729

Exhibit 5

Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

November 1, 2016

Dennis Taylor
Register No. R68729
Stateville Correctional Center

X-UW-03

Dear Mr. Taylor:

This is in response to your recent request, and subsequent denial, for Protective Custody placement. This office has determined the issue will be addressed without a formal hearing.

In accordance with DR 501D, on September 27, 2016, the Administration of Stateville Correctional Center notified you that your request for protective custody (PC) was denied; for which you chose to grieve.

This Board has reviewed your PC requests on the following dates: April 20, 2016, June 15, 2016 and August 15, 2016. Upon review, the Director denied each of these requests. During each of these reviews, your rationale for needing PC is centered around an altercation you had November 17, 2015 with Offender Peoples. Since January 4, 2016, Offender Peoples has been listed as your declared KSF.

In reviewing the past Hearing information, as well as current information provided by Stateville, this office finds no reason to reverse past decisions; as the reason for your PC request has not changed.

Based on a total review of all available information, it is the opinion of this office that the request for PC be denied and Taylor is to be placed back into General Population.

FOR THE BOARD:

Sherry Benton

Sherry Benton
Administrative Review Board
Office of Inmate Issues

CONCURRED:

John R. Baldwin

John R. Baldwin
Acting Director

cc: Warden, Stateville Correctional Center
Dennis Taylor, Register No. R68729

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Exhibit K

STATE OF ILLINOIS -- DEPARTMENT OF CORRECTIONS

ADJUSTMENT COMMITTEE
FINAL SUMMARY REPORT

Name: TAYLOR, DENNIS IDOC Number: R68729 Race: BLK
Hearing Date/Time: 1/28/2016 12:00 PM Living Unit: STA-F-02-04 Orientation Status: N/A
Incident Number: 201600323/1 - STA Status: Expunged Final

Date	Ticket #	Incident Officer	Location	Time
11/27/2015	201600323/1-STA	SAPIA, LOUIS A	F-HOUSE BULL PEN	08:15 PM

Offense	Violation	Final Result
301	Fighting Comments: INMATE PEOPLES K51695	

Witness Type	Witness ID	Witness Name	Witness Status
--------------	------------	--------------	----------------

No Witness Requested

RECORD OF PROCEEDINGS

Inmate Taylor R68729 present and DR read. Inmate Taylor R68729 pleads not guilty and states he went to IA because he was assaulted and felt his life was in danger. He never signed a statement which said that he and his cellmate had an altercation. Peoples struck him with a fan motor. Peoples threatened him by saying if he told about the assault he would have someone get him.

BASIS FOR DECISION

Medical records verify inmate Taylor R68729 was sent to the outside hospital on 11/27/2015 for a laceration to the head.

DISCIPLINARY ACTION (Consecutive to any priors)

RECOMMENDED

FINAL

--- EXPUNGED ---

Basis for Discipline:

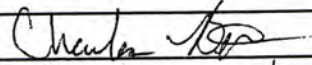
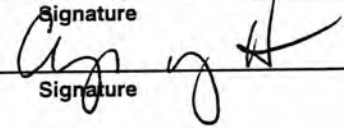
Signatures

Hearing Committee

BEST, CHARLES F - Chair Person

HARRIS, CYNTHIA

Recommended Action Approved

	01/28/16	BLK
Signature	Date	Race
	01/28/16	BLK
Signature	Date	Race

Final Comments: N/A

RANDY S PFISTER / NRL 1/29/2016

Chief Administrative Officer

Signature

01/29/16

Date

The committed person has the right to appeal an adverse decision through the grievance procedure established by Department Rule 504: Subpart F.

Employee Serving Copy to Committed Person

When Served -- Date and Time

EXHIBIT II

STATE OF ILLINOIS - DEPARTMENT OF CORRECTIONS
ADJUSTMENT COMMITTEE
FINAL SUMMARY REPORT

Name: TAYLOR, DENNIS IDOC Number: R68729 Race: BLK
Hearing Date/Time: 11/17/2015 09:37 AM Living Unit: STA-E 01-54 Orientation Status: N/A
Incident Number: 201503299/1 - STA Status: Final

Date	Ticket #	Incident Officer	Location	Time
11/5/2015	201503299/1-STA	PARKER, YRHYNEST E	INMATE COMMISSARY	02:00 PM

Offense	Violation	Final Result
102	Assaulting Any Person - Staff <i>Comments: HIT C/O'S HAND</i>	Guilty
304	Insolence	Guilty
305	Theft	Guilty
403	Disobeying A Direct Order	Guilty

Witness Type	Witness ID	Witness Name	Witness Status
--------------	------------	--------------	----------------

No Witness Requested

RECORD OF PROCEEDINGS

Inmate Taylor R68729 present and DR read. Taylor R68729 pleads not guilty. Taylor R68729 says this stems from 3 months ago. Taylor R68729 says he shook me down and felt my reading glasses. I told him I wasn't going to strip in front of women. I did walk away to be closer to the other people. This was all planned by the C/O I didn't have a candy bar was found on me.

BASIS FOR DECISION

R/O started that while he was conducting a shakedown on Inmate Taylor R68729, and felt a hard item inside Inmate Taylor waist band.
R/O asked Taylor R68729 to remove the item from his waistband and Taylor R68729 replied, "what are you talking about?"
R/O then tried to proceed with shakedown when inmate Taylor R68729 smacked the R/Os hand and stated, "what the fuck are you doing?"
Inmate Taylor was told not to move and he proceeded to walk away towards the docking area of the commissary.
Lt was notified and then told Inmate Taylor R68729 to remove whatever was in his waistband, Taylor R68729 stated, "I ain't got shit." Inmate Taylor R68729 then proceeded to run.
R/O retrieved 2 chocolate candy bars and Ambi face cream.
Inmate Taylor R68729 was identified by his stae issued id.
The committee is satisfie dthat inamte Taylor R68729 did in fact violate the charges cited.

DISCIPLINARY ACTION (Consecutive to any priors)

RECOMMENDED

3 Months C Grade
3 Months Segregation
3 Months Commissary Restriction
6 Months Contact Visits Restriction

Basis for Discipline: NATURE OFFENSE

FINAL

3 Months C Grade
3 Months Segregation
3 Months Commissary Restriction
6 Months Contact Visits Restriction

Signatures

Hearing Committee

JACOB, EDWARD - Chair Person

SANDERS, SYTERA L

Recommended Action Approved

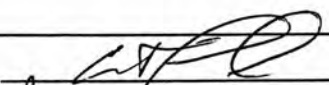
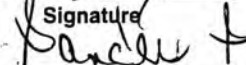
	11/17/15	BLK
Signature	Date	Race
	11/17/15	BLK
Signature	Date	Race

Exhibit M

STATE OF ILLINOIS DEPARTMENT OF CORRECTIONS

ADJUSTMENT COMMITTEE
FINAL SUMMARY REPORT

Name: TAYLOR, DENNIS

IDOC Number: R68729

Race: BLK

Hearing Date/Time: 11/17/2015 09:37 AM

Living Unit: STA-F-01-54

Orientation Status: N/A

Incident Number: 201503299/1 - STA

Status: Final

Final Comments: N/A

RANDY S PFISTER / NRL 11/18/2015

Chief Administrative Officer

Signature

11/18/15

Date

The committed person has the right to appeal an adverse decision through the grievance procedure established by Department Rule 504: Subpart F.

Employee Serving Copy to Committed Person

When Served -- Date and Time

EXHIBIT M

Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

Offender Name: Taylor, Dennis

Date: 4/5/16

Register # B68729

Facility: Stateville CC

This is in response to your grievance received on 1/6/16. This office has determined the issue will be addressed without a formal hearing. A review of the Grievance, Grievance Officer/CAO response to the grievance has been conducted. For a grievance that is direct review by the ARB, a review of the Grievance has been conducted.

Your issue regarding: Grievance dated: 12/4/15 Grievance Number: 4957 Griev Loc: Stateville

- | | |
|---|---|
| <input type="radio"/> Transfer denied by the Facility or Transfer Coordinator | <input type="radio"/> Commissary |
| <input type="radio"/> Dietary | <input type="radio"/> Trust Fund |
| <input type="radio"/> Personal Property | <input type="radio"/> Conditions (cell conditions, cleaning supplies) |
| <input type="radio"/> Mailroom/Publications | <input checked="" type="radio"/> Disciplinary Report dated <u>11/5/15</u> |
| <input type="radio"/> Assignment (job, cell) | Incident # <u>201503249/1-STA</u> |
| | <input type="radio"/> Other |

Based on a review of all available information, this office has determined your grievance to be:

- | | |
|--|---|
| <input type="radio"/> Affirmed, Warden _____ is advised to provide a written response of corrective action to this office by _____. | <input type="radio"/> Denied as the facility is following the procedures outlined in DR525. |
| <input type="radio"/> Denied, in accordance with DR504F, this is an administrative decision. | <input type="radio"/> Denied as Cell Assignment/Housing is consistent with the Department's determination of the appropriate Operational capacity of each facility. |
| <input checked="" type="radio"/> Denied, this office finds the issue was appropriately addressed by the facility Administration. | <input type="radio"/> Denied as procedures were followed in accordance with DR 420 for removal/denial of an offender from/for an assignment. |
| <input type="radio"/> Denied in accordance with AD05.03.103A (Monetary Compensation for Inmate Assignments) | <input checked="" type="radio"/> Denied as this office finds no violation of the offender's due process in accordance with DR504.80 and DR504.30. This office is reasonably satisfied the offender committed the offense cited in the report. |
| <input type="radio"/> Denied, as the transfer denial by the facility/TCO on _____ was reviewed in accordance with transfer procedures and is an administrative decision. | |

Other: _____

FOR THE BOARD: Leslie McCarty
Leslie McCarty
Administrative Review Board

CONCURRED: John R. Baldwin
John R. Baldwin
Acting Director

CC: Warden, Stateville Correctional Center
Taylor, Dennis Register No. B68729

7A
4/13/16

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

EXHIBIT N

Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

June 8, 2016

Dennis Taylor, R68729
Stateville Correctional Center
P.O. Box 112
Joliet, IL 60434

Re: Freedom of Information Act Request #160606063

Dear Mr. Taylor:

This letter is in response to your request to the Illinois Department of Corrections for information pursuant to the Illinois Freedom of Information Act, 5 ILCS 140/1, et seq.

You have requested Stateville Correctional Center Institutional Directive 05.03.14 and Administrative Directive 05.03.14. The Illinois Department of Corrections does not maintain or possess records responsive to your requests.

In the event you view this response as a denial of your request, you have a right to have the denial reviewed by the Public Access Counselor (PAC) at the Office of the Illinois Attorney General. 5 ILCS 140/9.5(a). You can file your request for review with the PAC to:

Public Access Counselor
Office of the Attorney General
500 South 2nd Street
Springfield, Illinois 62706

You also have the right to seek judicial review of your denial by filing a lawsuit in the state circuit court, pursuant to 5 ILCS 140/11.

If you choose to file a request for review with the PAC, you must do so within 60 calendar days of the date of this denial letter (5 ILCS 140/9.5(a)). Please note that you must include a copy of your original FOIA request and this denial letter when filing a request for review with the PAC.

Sincerely,
Lisa Weitekamp
Freedom of Information Officer

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Exhibit O

If you choose to file a request for review with the PAC, you must do so within 60 calendar days of the date of this denial letter (5 ILCS 140/9.5(a)). Please note that you must include a copy of your original FOIA request and this denial letter when filing a request for review with the PAC.

Sincerely,
Lisa Weitekamp
Freedom of Information Officer

Exhibit 0



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ATTORNEY GENERAL

June 30, 2016

Via electronic mail

Mr. Joel Diers
Legal Counsel
Illinois Department of Corrections
1301 Concordia Court
P.O. Box 19277
Springfield, Illinois 62794
JOEL.DIERS@doc.illinois.gov

RE: FOIA Request for Review – 2016 PAC 42608; IDOC # 160606063

Dear Mr. Diers:

The Public Access Bureau has received the attached Request for Review of the response by the Illinois Department of Corrections (IDOC) to a June 1, 2016, Freedom of Information Act (FOIA) request submitted by Mr. Dennis Taylor. We have determined that further action is warranted.

On June 1, 2016, Mr. Taylor submitted a FOIA request to IDOC seeking a copy of Institutional Directive 05.03.14 and Administrative Directive 05.03.14, which he asserts pertain to IDOC rules and policies regarding weapon violations and staff assaults. On June 8, 2016, IDOC responded by indicating that it did not maintain or possess any records responsive to the request. On June 24, 2016, this office received Mr. Taylor's Request for Review contesting IDOC's response.

As required under section 9.5(c) of FOIA (5 ILCS 140/9.5(c) (West 2014)), please provide a detailed explanation of the search IDOC performed to locate records responsive to Mr. Taylor's request. In your response, clarify if IDOC does possess any records regarding IDOC and/or Stateville Correctional Center rules and policies concerning weapon violations and staff assaults. If IDOC does possess responsive records and wishes to assert that those records are exempt from disclosure, please provide un-redacted copies of the records, for our confidential review, together with a written explanation that identifies the relevant section 7 exemption(s) (5 ILCS 140/7 (West 2014), as amended by Public Acts 99-298, effective August

Exhibit P


Mr. Joel Diers
June 30, 2016
Page 2

6, 2015; 99-346, effective January 1, 2016) and provides a detailed legal and factual basis for the application of the exemption(s). If you believe that other documents or information would help us as we review these issues, you may submit additional records or affidavits with the requested information.

This information must be submitted to our office within seven (7) business days after receipt of this letter. Under FOIA, "[t]he Public Access Counselor shall forward a copy of the answer to the person submitting the request for review, with any alleged confidential information to which the request pertains redacted from the copy. The requester may, but is not required to, respond in writing[.]" 5 ILCS 140/9.5(d) (West 2014). **If you claim that any portion of your written response is confidential, please send two versions of your response letter: a complete copy for this office's confidential review and a redacted version suitable for this office to forward to the requester.**

If you have questions or would like to discuss this matter, you may contact me by e-mail at sbarnaby@atg.state.il.us or by mail at the Chicago address listed on the bottom of the first page of this letter. Thank you.

Very truly yours,


SHANNON BARNABY
Assistant Attorney General
Public Access Bureau

Attachment

cc: Mr. Dennis Taylor, N92228 (will receive letter only)
Stateville Correctional Center
P. O. Box 112
Joliet, Illinois 60434

Exhibit P

Bruce Rauner
Governor



John Baldwin
Acting Director

The Illinois Department of Corrections

1301 Concordia Court, P.O. Box 19277 • Springfield, IL 62794-9277 • (217) 558-2200 TDD: (800) 526-0844

July 1, 2016

Ms. Shannon Barnaby
Assistant Attorney General
Office of the Illinois Attorney General
100 W. Randolph Street, 13th Floor
Chicago, IL 60601

RECEIVED
JUL 01 2016
Public Access
Counselor

Re: Request for Review 2016 PAC 42608 (IDOC # 160606063)

Dear Ms. Barnaby:

Please accept this as our response to the Request for Review submitted by Dennis Taylor, as described in your letter dated June 30, 2016. Mr. Taylor requested Administrative and Institutional Directive 05.03.141 regarding Weapon Violators/Staff Assaulters from the Illinois Department of Corrections ("IDOC"). I can confirm that IDOC does not possess or maintain records corresponding to the numbers given by Mr. Taylor.

Upon receipt of the request from Mr. Taylor, the IDOC Freedom of Information Office contacted IDOC and Stateville Correctional Center Policy and Directives units and were informed that no policies exist under those numbers.

Some individual facilities maintain Institutional Directives regarding Weapons Violators and Staff Assaulters but, IDOC routinely denies them based on their relation to the security of a correctional facility.

Joel M. Diers
Freedom of Information Office

Mission: To serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful reentry programs, and reducing victimization.

www.illinois.gov/idoc

Exhibit 10



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ATTORNEY GENERAL

July 13, 2016

Mr. Dennis Taylor, R68729
Stateville Correctional Center
P. O. Box 112
Joliet, Illinois 60434

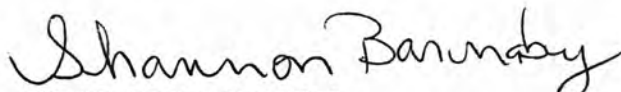
RE: FOIA Request for Review – 2016 PAC 42608

Dear Mr. Taylor:

The Public Access Bureau has received the enclosed response letter to your Request for Review from the Illinois Department of Corrections (IDOC).

You may, but are not required to, reply in writing to the public body's response. If you choose to reply, you must submit your reply to this office within seven (7) working days of your receipt of this letter. 5 ILCS 140/9.5(d) (West 2014). Please send a copy of your reply to Mr. Diers as well. You may contact me at the Chicago office listed below if you have any questions. Thank you.

Very truly yours,


SHANNON BARNABY
Assistant Attorney General
Public Access Bureau

Enclosure

cc: *Via electronic mail*
Mr. Joel Diers (will receive letter only)
Legal Counsel
Illinois Department of Corrections
1301 Concordia Court, P. O. Box 19277
Springfield, Illinois 62794
joel.diers@doc.illinois.gov

Exhibit Q



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ATTORNEY GENERAL

October 18, 2016

Mr. Dennis Taylor, R68729
Stateville Correctional Center
P. O. Box 112
Joliet, Illinois 60434

RE: FOIA Request for Review – 2016 PAC 42608

Dear Mr. Taylor:

The Public Access Bureau has received your inquiry concerning the status of your Request for Review of the response by the Illinois Department of Corrections (IDOC) to your June 1, 2016, Freedom of Information Act (FOIA) (5 ILCS 140 *et. seq.* (West 2014)) request. Your Request for Review is currently under consideration. Once we issue a determination, we will send a copy to you as well as to IDOC.

You may contact me by mail at the Chicago address listed below if you have any further questions. Thank you.

Very truly yours,

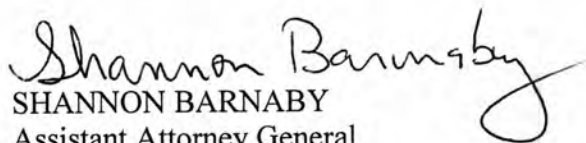

SHANNON BARNABY
Assistant Attorney General
Public Access Bureau

Exhibit R

W 812

(Continue on reverse side if necessary)

EMERGENCY REVIEW

Distribution: Master File; Committed Person

Exhibit 5

Dennis Trojan
AR68729
P.O. Box 1000
Menard, IL
62259

Correspondence From IDOC Inmate

-LEGAL MAIL-



U.S. POSTAGE >> PITNEY BOWES



ZIP 62259 \$ 006.70⁰
02 1W
0001389078 JAN 17, 2017



01/19/2017-1



PC

RECEIVED

JAN 19 2017

MT

THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

U.S. District Court
Northern District of Illinois, Eastern Div.
219 South Dearborn
20th Floor
Chicago, Illinois

60604

Legal Mail

Provided

1:17-cv-0442

Judge Thomas M. Durkin

Magistrate Judge Sheila M. Finnegan

PC5